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**PATENT** 

## THE UNITED STATES PATENT AND TRADEMARK OFFICE

Inventor:	William E. Sobel	Examiner:	Merilyn P. Nguyen		
Application No.:	10/642,355	Art Unit:	2163		
Filed:	August 14, 2003	Docket No.	SYMAP024		
Title:	SAFELY ROLLING BACK A COMPUTER IMAGE				

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail in a prepaid envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450,

Alexandria, VA 22313-1450 on:

August 1, 2006.

Jannifer C. Gross

TRANSMITTAL OF AMENDMENT A

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is Amendment A in response to Office Action mailed March 1, 2006, in the above-identified application.

The fee has been calculated as shown below.

CLAIMS	After Amd.	HP*	Extra	Small Entity		}	Large Entit	у
				Rate	Fee		Rate .	Fee
Total	27	29	-0-	x \$25 = \$		OR	x \$50 = \$	
Independent	7	5	-0-	x \$100 = \$		OR	x \$200 = \$	
Multiple Dependent Claims		x \$180 = \$		OR	x \$360 = \$			
*HP = Highest p	reviously paid			TOTAL FEE\$		OR	TOTAL FEE \$	-0-

Applicant(s) hereby petition for following extension of time in which to respond to the outstanding Office Action.

	SMALL ENTITY			LARGE ENTITY	
	Rate	Add'l Fee		Rate	Add'l Fee
Extension for Response within FIRST month	x \$60 = \$		OR	x \$120 = \$	
Extension for Response within SECOND month	x \$225 = \$		OR	x \$450 = \$	\$450.00
Extension for Response within THIRD month	x \$510 = \$		OR	x \$1020 = \$	
Extension for Response within FOURTH month	x \$795 = \$		OR	x \$1590 = \$	
Extension for Response within FIFTH month	x \$1080 = \$		OR	x \$2160 = \$	<u> </u>

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oe gra	Applicant(s) believe that no (additional) Extension of Time is required; however, if it is nined that such an extension is required, Applicant(s) hereby petition that such an extension nted and authorize the Commissioner to charge the required fees for an Extension of Time 37 CFR 1.136 to Deposit Account No. 50-0685. (SYMAP024).
⊠ fee and	Enclosed is our Check No. $\underline{2483}$ in the amount of $\underline{\$450.00}$ to cover the additional claim d/or extension of time fees.
	Enclosed is Applicant Initiated Interview Request Form, PTOL-413A.
$\boxtimes$	Enclosed are one (1) sheet of replacement drawings.
cover	Please charge Deposit Account No. 50-0685 (SYMAP024) in the amount of \$to the additional claim fee and/or extension of time fees.
	If the required fees are missing or any additional fees are required during the pendency of oject application, please charge such fees or credit any overpayment to Deposit Account 0-0685 (SYMAP024).
	OTHER:
	Respectfully submitted, VAN PELT, YI & JAMES LLP

Robyn Wagner Registration No. 50,575

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Telephone: 408-973-2585

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